

114.3 CMR 39.00: REHABILITATION CLINIC SERVICES, AUDIOLOGICAL SERVICES, RESTORATIVE SERVICES

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39.01: General Provisions

(1) Scope, Purpose and Effective Date. 114.3 CMR 39.00 shall govern the rates of payment to be used by all governmental units for rehabilitation clinic services, audiological services and restorative services provided to publicly-aided individuals by eligible providers. Rates for services rendered to individuals covered by M.G.L.c.152 (Workers Compensation) are set forth at 114.3 CMR 40.03(2). 114.3 CMR 39.00 shall be effective February 1, 2005.

(2) Disclaimer of Authorization of Services. 114.3 CMR 39.00 is not authorization for or approval of the procedures for which rates are determined pursuant to 114.3 CMR 39.00. Governmental units that purchase care are responsible for the definition, authorization, and approval of care and services extended to publicly-aided clients.

(3) Coverage. Except as provided otherwise, 114.3 CMR 39.00 and the rates of payment contained herein shall apply to services rendered to eligible providers of rehabilitation clinic services, audiological services, and restorative services to publicly-aided individuals. The rates of payment specified herein are full compensation for professional services rendered, as well as for any administrative or supervisory duties.

(4) Exceptions. Rates of payment contained herein shall not apply to indirect services, such as case conferences or in-service education programs provided by eligible providers in long-term care facilities.

(5) Authority. 114.3 CMR 39.00 is adopted pursuant to M.G.L. c.118G.

(6) Coding Updates and Corrections. The Division may publish procedure code updates and corrections in the form of an Informational Bulletin. The publication of such updates and corrections will list: 1) codes for which the code numbers only changed, with the corresponding cross-walk; 2) codes for which the code remains the same but the description has changed; 3) deleted codes for which there is no

cross-walk; 4) for entirely new codes which require new pricing, the Division will list these codes and apply individual consideration in reimbursing for these new codes until appropriate rates can be developed.

39.02: General Definitions

- (1) Meaning of Terms. In addition to the general definitions contained in 114.3 CMR 2.00, terms used in 114.3 CMR 39.00 shall have the meaning set forth in 114.3 CMR 39.02.

Assessment for a Hearing Aid. A procedure which includes:

- (a) Assessment of a patient's performance by appropriate tests with hearing aid devices;
- (b) A recheck of the patient and hearing aid after the prescribed aid has been fitted and used for a trial period; and
- (c) Counseling related to the patient's adjustment to the use of the hearing aid. (114.3 CMR 39.02 (1)(b) and (c) apply only if a hearing aid is prescribed for patient.)

Audiological Services. Testing related to the determination of hearing loss, evaluation of hearing aids, the prescription of hearing aid devices, and aural rehabilitation which includes lip-reading and auditory training.

Aural Rehabilitation. Therapy provided by a qualified audiologist either in a group or individually.

- (a) Lip-reading: Training of the visual modality to improve the understanding of the speech or language of other speakers.
- (b) Auditory Training: Training of the auditory modality to improve the understanding of the speech or language of other speakers.

Complete Audiological Evaluation. Includes a routine audiological evaluation plus site of Lesion Testing (impedance Testing and/or Recruitment Testing) as needed or recommended by a physician.

Comprehensive Restorative and Rehabilitation Clinic Evaluation. Shall mean an all-inclusive, in-depth assessment of recipient's medical condition and level of functioning and limitations, to determine the need for treatment and, if necessary, to develop a plan of treatment. The comprehensive evaluation includes a written report.

Electroacoustic Evaluation for a Hearing Aid, Binaural. A complete audiological evaluation with a check of the patient's personal hearing aid (includes hearing aid evaluation and electroacoustical analysis of the aid).

Eligible Provider of Audiological Services. A provider who meets such conditions of participation as have been or may be adopted from time to time by a governmental unit purchasing audiological services or by purchasers under the Worker's Compensation Act; and

- (a) an audiologist who is currently licensed by the Board of Speech Language Pathology and Audiology; or
- (b) any speech and hearing center (proprietorship, partnership or corporation) which is not part of a hospital and provides authorized speech, hearing or language services rendered by a qualified audiologist or speech pathologist and does not bill separately from such facility for professional services.

Eligible Provider of Rehabilitation Clinic Services. Freestanding clinics providing rehabilitative services which are licensed by the Department of Public Health, and which meet such conditions of participation as may be required by a governmental unit purchasing rehabilitation services, or by a purchaser under the Worker's Compensation Act.

Eligible Provider of Restorative Services. A provider who meets such conditions of participation as have been or may be adopted from time to time by a governmental unit purchasing restorative services or by purchasers under the Workers' Compensation Act; and

- (a) a physical therapist who is currently licensed by the Board of Allied Health Professionals; or
- (b) an occupational therapist who is licensed by the Board of Allied Health Professionals; or
- (c) a speech therapist who is currently licensed by the Board of Speech and Language Pathology and Audiology; or
- (d) any speech and hearing center (proprietorship, partnership or corporation) which provides authorized speech or language services rendered by a qualified speech pathologist who does not bill separately from such facility for professional services rendered.

Governmental Unit. The Commonwealth of Massachusetts, or any of its departments, agencies, boards, commissions or political subdivisions.

Group Session. Therapeutic services directed toward more than one patient in a single visit, utilizing group participation as a treatment technique.

HCPCS. The Health Care Financing Administration Common Procedure Coding System.

Hearing Aid Check. A check of the functioning of the patient's aid; may be monaural or binaural.

Medical Evaluation. While this phrase appears as part of HCPCS nomenclature, it should not be literally interpreted; evaluations may be performed by the appropriate staff as determined by the eligible provider.

Non-organic Test Battery. Tests done to determine functional hearing loss.

Office Visit. Patient treatments rendered in a speech and hearing center, a licensed clinic or in a practitioner's office (whether an individual practice, a group practice or an association of practitioners). If a practitioner has an office in his or her home that is used for patient treatment then services rendered there would be billed as office visits.

Out-of-Office Visits. Patient treatments rendered in a nursing home, school, a patient's home or in any other setting where the practitioner travels from his or her usual place of business to render patient treatment.

Physician's Comprehensive Rehabilitation Evaluation. A cardiopulmonary, neuromuscular, orthopedic functional assessment performed at a rehabilitation clinic by a physician.

Publicly-Aided Individual. A person for whose medical and other services a governmental unit is in the whole or in part liable under a statutory program.

Rehabilitation. The process of providing, in a coordinated manner, those comprehensive services deemed appropriate to the needs of the physically disabled individual, in a program designed to achieve objectives of improved health and welfare with realization of his maximum physical, social and vocational potential.

Restorative Services. Shall mean services provided by a physical therapist, an occupational therapist or a speech pathologist at the referral of a physician for the purpose of maximum reduction of physical and speech disability and restoration of the patient to a maximum functional level.

Routine Audiological Evaluation. A procedure which includes:

- (a) Pure tone audiogram, by air and bone conduction testing.
- (b) Speech reception and discrimination testing.

Speech/Language Pathology Services. Includes the evaluation and treatment of communicative disorders with regard to the functions of articulation (including aphasia and dysarthria), language, voice and fluency.

With Continuing Medical Supervision. While this phrase appears as part of HCPCS nomenclature, supervision may be provided by staff as designated by the eligible provider.

39.03: General Rate Provisions

(1) Rate Determination. Rates of payment for authorized services to which 114.3 CMR 39.00 applies shall be the lower of:

- (a) the eligible provider's usual fee to patients other than publicly-aided or industrial accident patients; or
- (b) the schedule of allowable fees set forth in 114.3 CMR 39.04.

(2) Out of office rates. For Restorative Services (physical, occupational, and speech), and for Audiological Services, out-of-office rates will be 115% of their respective in-office counterparts.

(3) Multiple Procedures in Physical Therapy. The performance of more than one type of physical therapy treatment in a single visit. Under such circumstances, the provider shall receive 100% of the applicable fee for each procedure, with a maximum of four procedures (or a total of one hour) allowed in a given visit.

(4) Individual Consideration and Nonlisted Procedures. Non-listed procedures and services designated Individual Consideration (IC) are individually considered items. The governmental unit or purchaser under the Worker's Compensation Act shall analyze the eligible providers report to determine whether the item shall be authorized as an individually considered item. This report shall include a pertinent history and diagnosis, a description of the service rendered and the length of time spent with the patient. In making the determination of whether the service is appropriately classified as an individually considered item the following criteria shall be used:

- (a) policies, procedures and practices of other third party purchasers of care, both governmental and private;
- (b) the severity and complexity of the patient's disorder or disability;
- (c) prevailing provider ethics and accepted practice;
- (d) time, degree of skill, and cost including equipment cost required to perform the procedure(s).

(5) Innovative Purchasing Contracts. Under certain circumstances, it may be more appropriate for governmental units or purchasers under the Worker's Compensation Act to purchase services on an hourly basis rather than on a per visit basis as described in the regulation. This would be appropriate in circumstances where a large number of patients are treated by an individual practitioner on a regular basis for a particular purchaser at one site and/or where the treatment times described in the procedure codes herein do not define the treatment times desired by the purchaser. Such contracts would be subject to the approval of the Rate Setting Commission.

39.04: Allowable Fees for Rehabilitation Clinic Services, Audiological Services and Restorative Services

NOTE: As a guideline, rates for restorative, audiological and rehabilitation clinic services for aquatic therapy, nautilus training, work evaluations/job site analysis, work hardening programs and other unlisted services shall be determined by applying the appropriate portion of the hourly rate specified in 114.3 CMR 39.04(4): Hourly Rates for Innovative Purchasing Contracts, Individual Consideration and Nonlisted Procedures. Diagnostic procedures which require specialized machinery, such as muscle testing during isometric and isokinetic exercises (e.g., use of cybex machine) should be reimbursed with consideration for additional equipment costs and technical assistance, in addition to the prorated hourly fee for therapists' services and routine overhead expenses.

1) Comprehensive Rehabilitation Clinic Evaluations

Payment for Rehabilitation Clinic Evaluation services for less than the hours designated below shall be determined by prorating the hourly rate specified in 114.3 CMR 39.04(4)

Service Code	Allowable Fee	Service Description
92506	\$41.93	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status (per hour with a maximum of 3 hours)
92506 HA	\$41.93	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status; child/adolescent program; (per hour with a maximum of 4 hours); (Use when billing for ages 21 and younger)
92506 TF	\$41.93	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status; intermediate level of care; (per hour with a maximum of 3 hours)
97001	\$41.93	Physical therapy evaluation (per hour with a maximum of 2 hours)
97001 HA	\$41.93	Physical therapy evaluation; child/adolescent program; (per hour, maximum of 3 hours). (Use

		when billing for ages 21 and younger)
97001 TF	\$41.93	Physical therapy evaluation; intermediate level of care; (per hour, maximum of 3 hours)
97003	\$41.93	Occupational therapy evaluation (per hour with a maximum of two hours)
97003 HA	\$41.93	Occupational therapy evaluation; child/adolescent program (per hour, maximum of 3 hours). (Use when billing for ages 21 and younger.)
97003 TF	\$41.93.	Occupational therapy evaluation; intermediate level of care; (maximum of 3 hours)

Rehabilitation Clinic Treatments and Physician Evaluations

Evaluations		
99203	\$69.18	Office or other outpatient visit for the evaluation and management of a new patient which requires these three key components: <ul style="list-style-type: none"> - a detailed history - a detailed examination; and - medical decision making of low complexity
99205	\$124.27	Office or other outpatient visit for the evaluation and management of a new patient which requires these three key components: <ul style="list-style-type: none"> - a comprehensive history - a comprehensive examination; and - medical decision making of high complexity
99212	\$27.67	Office or other outpatient visit for the evaluation and management of an established patient which requires at least two of these three key components: <ul style="list-style-type: none"> - a problem focused history - a problem focused examination; and - straightforward medical decision making
99214	\$59.86	Office or other outpatient visit for the evaluation and management of an established patient which requires at least two of these three key components: <ul style="list-style-type: none"> - a detailed history - a detailed examination - medical decision making of moderate complexity

99215	\$87.14	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: - a comprehensive history - a comprehensive examination; and - medical decision making of high complexity
Treatments		
97150	\$5.24 per 15 minute unit	Therapeutic procedure(s), group (2 or more individuals); (each 15 minutes)
97799	\$10.48 per 15 minute unit (two units, at \$20.96)	unlisted physical medicine/rehabilitation service or procedure; (each 15 minutes)

(2) Audiological Services

92507	\$10.48 per 15-minute unit	Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); individual; (each 15 minutes)
92508	\$5.24 per 15-minute unit	Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); group, two or more individuals (each recipient up to 15 minutes)
92541	\$41.38	Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording
92542	\$36.36	Positional nystagmus test, minimum of 4 positions, with recording
92543	\$35.10	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests), with recording
92544	\$28.52	Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording
92545	\$24.03	Oscillating tracking test, with recording
92546	\$31.71	Sinusoidal vertical axis rotational testing
92547	\$21.51	Use of vertical electrodes (List separately in addition to code for primary procedure) (Use 92547 in conjunction with codes 92541-92546.) (For unlisted vestibular tests, use 92599)
92552	\$13.14	pure tone audiometry (threshold); air only
92553	\$17.19	pure tone audiometry (threshold); air and bone
92555	\$10.28	speech audiometry; threshold only

92556	\$15.95	speech audiometry; threshold and discrimination
92557	\$43.43	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)
92562	\$9.70	loudness balance test, alternate binaural or monaural (sp to 92563,92564,and 92565)
92563	\$9.01	tone decay test(sp to 92562, 92564,and 92565)

92564	\$11.27	short increment sensitivity index (sisi) (sp to 92562, 92563, and 92565)
92565	\$9.01	Stenger test, pure tone (sp to 92562, 92563, and 92564)
92567	\$17.39	Tympanometry (impedance testing)
92568	\$12.51	Acoustic reflex testing
92569	\$13.22	Acoustic decay testing
92572	\$2.30	staggered spondaic word test (sp to 92576 and 92577)
92576	\$10.59	synthetic sentence identification test (sp to 92577)
92577	\$15.08	Stenger test, speech (sp to 92576)
92579	\$15.08	Visual reinforcement audiometry (VRA)
V5010	\$44.11	Assessment for hearing aid. (Initial visit)
92582	\$15.08	conditioning play audiometry
92583	I.C.	select picture audiometry
92584	I.C.	electrocochleography
92585	\$72.42	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive
92586	\$52.86	limited
92587	\$49.64	evoked otoacoustic emissions; limited (single stimulus level, either transient or distortion products)
92588	\$69.47	evoked otoacoustic emissions; comprehensive or diagnostic evaluation (comparison of transient and distortion product otoacoustic emissions at multiple levels and frequencies)
92590	\$17.09	Hearing aid examination and selection, monaural
92591	\$25.35	hearing aid examination and selection; binaural
92592	\$10.72	Hearing aid check, monaural (Follow-up)

92593	\$21.43	Hearing aid check, binaural (Follow-up)
92594	\$29.37	Electroacoustic evaluation for hearing aid, monaural

92595	\$58.76	Electroacoustic evaluation for hearing aid, binaural. (Complete audiological evaluation with check of recipient's personal hearing aid [includes hearing aid evaluation with the aid and electroacoustical analysis of the aid])
92596	\$16.47	ear protector attenuation measurements
92620	\$41.93	Evaluation of central auditory function, with report; initial 60 minutes
92621	\$10.48	- each additional 15 minutes
<u>Aural Rehabilitation:</u>		
Special Test Battery:		
V5008	\$21.75	Hearing screening (non-organic test battery)
92700	I.C.	Unlisted otorhinolaryngologic service or procedure

(3) Restorative Services - Physical Therapy

Physical medicine treatment to one or more areas

Modalities

97010	\$10.48	Application of a modality to one or more areas; hot or cold packs
97012	\$10.48	traction, mechanical
97014	\$10.48	electrical stimulation (unattended)
97016	\$10.48	vasopneumatic devices
97018	\$10.48	paraffin bath
97020	\$10.48	microwave
97022	\$10.48	whirlpool
97024	\$10.48	diathermy
97026	\$10.48	infrared
97028	\$10.48	ultraviolet
97032	\$10.48	Electrical stimulation (manual), each 15 minutes
97033	\$10.48	Iontophoresis, each 15 minutes
97034	\$10.48	Contrast baths, each 15 minutes
97035	\$10.48	Ultrasound, each 15 minutes
97036	\$10.48	Hubbard tank, each 15 minutes
97039	\$10.48	Unlisted modality (specify type and time if constant attendance)

Therapeutic Procedures:		
97110	\$10.48	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97112	\$10.48	Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
97113	\$10.48	Aquatic therapy with therapeutic exercises
97116	\$10.48	Gait training (includes stair climbing)
97124	\$10.48	massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)
97139	\$10.48	Unlisted therapeutic procedure (specify)
97140	\$10.48	Manual therapy techniques (e.g. mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes
97150 GP	\$5.24 per 15 minute unit	Therapeutic procedures, group (2 or more individuals); services delivered under an outpatient physical therapy plan of care (per recipient, 15 minute units)
97530	\$10.48	Therapeutic Activities direct (one on one); patient contact by the provider(use of dynamic activities to improve functional performance), each 15 minutes
97597	I.C.	Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (eg, high pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps), with or without topical application(s), wound assessment, and instruction(s) for ongoing care, may include use of a whirlpool, per session; total wound(s) surface area less than or equal to 20 square centimeters
97602	I.C.	Removal of devitalized tissue from wound(s), non-selective debridement, without anesthesia (eg, wet-to-moist dressings, enzymatic, abrasion), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session
97750	\$10.48	Physical performance test or measurement (eg. Musculo-skeletal, functional capacity), with written

		report, each 15 minutes
Evaluations:		
97001	\$41.93	Physical therapy evaluation (per hour with a maximum of two hours)
97001 HA	\$41.93	Physical therapy evaluation; child/adolescent program; (per hour, maximum of 3 hours). (Use when billing for ages 21 and younger)
97001 TF	\$41.93	Physical therapy evaluation; intermediate level of care; (maximum of 3 hours)
97002	\$41.93	Physical therapy re-evaluation (per hour)

Restorative Services – Occupational Therapy

97520	\$10.48	Prosthetic training, upper and lower extremities, each 15 minutes
97530	\$10.48	Therapeutic Activities direct (one on one); patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes
97532	\$10.48	Development of cognitive skills to improve attention, memory, problem solving, (includes compensatory training), direct (one-on-one) patient contact by the provider, each 15 minutes
97533	\$10.48	Sensory integrative techniques to enhance memory processing and promote adaptive responses to environmental demands, direct(one-on-one)patient contact by the provider, each 15 minutes
97535	\$10.48	Self care/home management training (eg, activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of adaptive equipment) direct one on one contact by provider, each 15 minutes
97537	\$10.48	Community/work reintegration training (eg, shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis), direct one on one contact by provider, each 15 minutes
97542	\$10.48	Wheelchair management/propulsion training, each 15 minutes

97545	\$83.86	Work hardening/conditioning; initial 2 hours
97546	\$41.93	Each additional hour (list separately in addition to code for primary procedure); use with 97545
97755	\$10.48	Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one- on- one contact by provider, with written report, each 15 minutes
97003	\$41.93	Occupational therapy evaluation (per hour, with maximum of two hours)
97003- HA	\$41.93	Occupational therapy evaluation; child/adolescent program; (per hour, maximum of 3 hours); (Use when billing for ages 21 and younger)
97003 - TF	\$41.93	Occupational therapy evaluation; intermediate level of care; (per hour, maximum of 3 hours)
97004	\$41.93	Occupational therapy re-evaluation (per hour)
97150 GO	\$5.24 per 15-minute unit	Therapeutic procedure(s); group (2 or more individuals); services delivered under an outpatient occupational therapy plan of care; (each 15 minutes)

Restorative Services - Speech Therapy

92506	\$41.93	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status (per hour with a maximum of three hours)
92506 HA	\$41.93	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status; child/adolescent program;(per hour with a maximum of 4 hours); (Use when billing for ages 21 and younger)
92507	\$10.48	Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); individual (office, each 15 minutes)
92508	\$5.24	Treatment of speech, language, voice communication, and/or auditory processing disorder(includes aural rehabilitation);group, two or more individuals (each recipient, up to 15 minutes)
92526	\$10.48	Treatment of swallowing dysfunction and/or oral

		function for feeding; each 15 minutes
92610	\$41.93	Evaluation of oral and pharyngeal swallowing function (per hour, maximum of one hour)

(4) Hourly Rates for Innovative Purchasing Contracts, Individual Consideration and Non-Listed Procedures

NOTE: As a guideline, rates for restorative, audiological and rehabilitation clinic services for aquatic therapy, nautilus training, work evaluations/job site analysis, work hardening programs and other unlisted services shall be determined by applying the appropriate portion of the hourly rate specified in 114.3 CMR 39.04(4): Hourly Rates for Innovative Purchasing Contracts, Individual Consideration and Nonlisted Procedures. Diagnostic procedures which require specialized machinery, such as muscle testing during isometric and isokinetic exercises (e.g., use of cybex machine) should be reimbursed with consideration for additional equipment costs and technical assistance, in addition to the prorates hourly fee for therapists' services and routine overhead expenses.

Rehabilitation Clinic Physical Therapist	\$41.93/hr.
Rehabilitation Clinic Occupational Therapist	\$41.93/hr.
Rehabilitation Clinic Speech Therapist	\$41.93/hr.
Audiologist Services	\$41.93/hr.
Restorative Physical Therapy office visit	\$41.93/hr.
Restorative Occupational Therapy office visit	\$41.93/hr.
Restorative Speech Therapy office visit	\$41.93/hr.
Restorative Physical Therapy out-of-office visit	\$48.21/hr.
Restorative Occupational Therapy out-of-office visit	\$48.21/hr.
Restorative Speech Therapy out-of-office visit	\$48.21/hr.
Rehabilitation Clinic Therapist out-of-office	\$48.21/hr.

39.05 Required Reports

(1) Upon the request of the Division of Health Care Policy and Finance providers will forward to the Commission cost or other data within a specified time not sooner than 90 days following the close of the fiscal year of the provider.

(2) Extension of Filing Date. The Division may grant an extension of time for the submission of cost or other data upon the written request from the provider demonstrating that good cause exists for such an extension.

(3) Failure to File Timely Reports. Failure on the part of a provider to submit accurate information within the time as required by 114.3 CMR 39.05 (1), or to submit other acceptable data and statistics which may be required, may result in the delay, reduction or elimination of the individual provider's rates to which such information is applied, as well as application of other sanctions provided by law.

39.06 : Severability of the Provisions of 114.3 CMR 39.00

(1) The provisions of 114.3 CMR 39.00 are severable, and if any provision of 114.3 CMR 39.00 or application of such provision to any provider covered under 114.3 CMR 39.00 or any circumstances shall be held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 114.3 CMR 39.00 or application of such provisions to providers covered under 114.3 CMR 39.00 or circumstances other than those held invalid.

REGULATORY AUTHORITY

114.3 CMR 39.00: M.G.L.c.118G.